

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 2
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Right to Rise USA		FEC IDENTIFICATION NUMBER ▼ C C00571372	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY 07 / 08 / 2015	

Full Name of Payee RSM		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 06 / 2015	
Mailing Address 1702 E Highland Ave. Suite 408		Amount 3500.00	
City Phoenix	State AZ	Zip Code 85016	Transaction ID : SE.4105
Purpose of Expenditure Media production: Also oppose Hillary Clinton		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 08 / 2015
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		47500.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee RSM		Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 06 / 2015	
Mailing Address 1702 E Highland Ave. Suite 408		Amount 3500.00	
City Phoenix	State AZ	Zip Code 85016	Transaction ID : SE.4107
Purpose of Expenditure Media production: Also oppose Hillary Clinton		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 07 / 08 / 2015
Name of Federal Candidate Jeb Bush		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		19500.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	7000.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Charles R. Spies

[Electronically Filed]

Date

MM / DD / YYYY
07 / 31 / 2015

Signature